

PRISONER'S CIVIL RIGHTS COMPLAINT (Rev. 05/2015)

**IN THE UNITED STATES DISTRICT COURT  
FOR THE \_\_\_\_\_ DISTRICT OF TEXAS  
\_\_\_\_\_ DIVISION**

United States Courts  
Southern District of Texas  
**FILED**

OCT 13 2022

Julian G. Silva  
Plaintiff's Name and ID Number

Nathan Ochener, Clerk of Court.

Wynne Unit TDCJ  
Place of Confinement

CASE NO. \_\_\_\_\_  
(Clerk will assign the number)

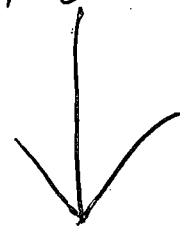
v.

Wynne-medical Dept  
Defendant's Name and Address

810 Fm 2821 W-Highway 75N

Doctor Tran  
Defendant's Name and Address

Sgt Harris.  
Defendant's Name and Address  
(DO NOT USE "ET AL.")



**INSTRUCTIONS - READ CAREFULLY**

**NOTICE:**

**Your complaint is subject to dismissal unless it conforms to these instructions and this form.**

1. To start an action you must file an original and one copy of your complaint with the court. You should keep a copy of the complaint for your own records.
2. Your complaint must be legibly handwritten, in ink, or typewritten. You, the plaintiff, must sign and declare under penalty of perjury that the facts are correct. If you need additional space, **DO NOT USE THE REVERSE SIDE OR BACKSIDE OF ANY PAGE.** ATTACH AN ADDITIONAL BLANK PAGE AND WRITE ON IT.
3. You must file a separate complaint for each claim you have unless the various claims are all related to the same incident or issue or are all against the same defendant, Rule 18, Federal Rules of Civil Procedure. Make a short and plain statement of your claim, Rule 8, Federal Rules of Civil Procedure.
4. When these forms are completed, mail the original and one copy to the clerk of the United States district court for the appropriate district of Texas in the division where one or more named defendants are located, or where the incident giving rise to your claim for relief occurred. If you are confined in the Texas Department of Criminal Justice, Correctional Institutions Division (TDCJ-CID), the list labeled as "VENUE LIST" is posted in your unit law library. It is a list of the Texas prison units indicating the appropriate district court, the division and an address list of the divisional clerks.

**FILING FEE AND *IN FORMA PAUPERIS* (IFP)**

1. In order for your complaint to be filed, it must be accompanied by the statutory filing fee of \$350.00 plus an administrative fee of \$50.00 for a total fee of **\$400.00**.
2. If you do not have the necessary funds to pay the fee in full at this time, you may request permission to proceed *in forma pauperis*. In this event you must complete the application to proceed *in forma pauperis*, setting forth information to establish your inability to prepay the fees and costs or give security therefor. You must also include a current six-month history of your inmate trust account. If you are an inmate in TDCJ-CID, you can acquire the application to proceed *in forma pauperis* and the certificate of inmate trust account, also known as *in forma pauperis* data sheet, from the law library at your prison unit.
3. The Prison Litigation Reform Act of 1995 (PLRA) provides "... if a prisoner brings a civil action or files an appeal *in forma pauperis*, the prisoner shall be required to pay the full amount of a filing fee." See 28 U.S.C. § 1915. Thus, the court is required to assess and, when funds exist, collect, the entire filing fee or a initial partial filing fee and monthly installments until the entire amount of the filing fee has been paid by the prisoner. If you submit the application to proceed *in forma pauperis*, the court will apply 28 U.S.C. § 1915 and, if appropriate, assess and collect the entire filing fee or an initial partial filing fee, then monthly installments from your inmate trust account, until the entire \$350.00 statutory filing fee has been paid. (The \$50.00 administrative fee does not apply to cases proceeding *in forma pauperis*.)
4. If you intend to seek *in forma pauperis* status, do not send your complaint without an application to proceed *in forma pauperis* and the certificate of inmate trust account. Complete all essential paperwork before submitting it to the court.

**CHANGE OF ADDRESS**

It is your responsibility to inform the court of any change of address and its effective date. Such notice should be marked "**NOTICE TO THE COURT OF CHANGE OF ADDRESS**" and shall not include any motion for any other relief. Failure to file a NOTICE OF THE COURT OF CHANGE OF ADDRESS may result in the dismissal of your complaint pursuant to Rule 41(b), Federal Rules of Civil Procedure.

**I. PREVIOUS LAWSUITS:**

- A. Have you filed *any* other lawsuit in state or federal court relating to your imprisonment? YES NO
- B. If your answer to "A" is "yes", describe each lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, giving the same information.)
  1. Approximate date of filing lawsuit: 9-1-22
  2. Parties to previous lawsuit:
 

Plaintiff(s) Julian G. Silvas

Defendant(s) Gordon - Patrick | Hoffman - Carter - medical
  3. Court: (If federal, name the district; if state, name the county.) Pro civil Rights
  4. Cause number: 4:22-cv-2844
  5. Name of judge to whom case was assigned: not sure
  6. Disposition: (Was the case dismissed, appealed, still pending?) active
  7. Approximate date of disposition: \_\_\_\_\_

II. PLACE OF PRESENT CONFINEMENT: Wynn-Unit TDCJ

III. EXHAUSTION OF GRIEVANCE PROCEDURES:

Have you exhausted all steps of the institutional grievance procedure? YES ☒ YES ☐ NO  
 Attach a copy of your final step of the grievance procedure with the response supplied by the institution.

IV. PARTIES TO THIS SUIT:

A. Name and address of plaintiff: Julian G Silvas  
810 Fm 2821 W Highway 75 N.

B. Full name of each defendant, his official position, his place of employment, and his full mailing address.

Defendant #1: Medical Dept 810-Fm2821-Highway 75 N  
They are not giving me my medical attention  
 Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

Have clearly explained all issues, don't even have  
Blood Pressure meds.  
 Defendant #2: 810 Fm 2821 Highway 75 N. Doctor Tran - Wynn Unit

She ain't helping me to my medical needs,  
 Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

As the doctor she should do as right is right

Defendant #3: Warden Bowers Wynn-Unit  
He does not address any issues that could

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

help us, have exhausted the Grievance and nothing positive

Defendant #4: Byran Collier-Director P.O. Box 99 Huntsville  
As the director I write him for help but 77342

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

he does nothing to help. what goes on negative is ok and wrong.

Defendant #5: OIG Dept Wynn-Unit  
These cops do not do there Job, I am involved  
 Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

With them but they let drugs still come in. Inmates loose there life and they do nothing also.

## V. STATEMENT OF CLAIM:

State here in a short and plain statement the facts of your case, that is, what happened, where did it happen, when did it happen, and who was involved. Describe how each defendant is involved. You need not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach extra pages if necessary, but remember the complaint must be stated briefly and concisely. IF YOU VIOLATE THIS RULE, THE COURT MAY STRIKE YOUR COMPLAINT.

As the plaintiff I see all the defendant's pro's and con's, but they all do bad. They are only here for a pay check. There job is our protection and they care less.

## VI. RELIEF:

State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.

To sue in a official capacity, my freedom, also charges file for etc

## VII. GENERAL BACKGROUND INFORMATION:

A. State, in complete form, all names you have ever used or been known by including any and all aliases.

Julian G-Silva

B. List all TDCJ-CID identification numbers you have ever been assigned and all other state or federal prison or FBI numbers ever assigned to you.

2020552 1841830- 2390812

## VIII. SANCTIONS:

A. Have you been sanctioned by any court as a result of any lawsuit you have filed? not sure YES ☐ NO ☐

B. If your answer is "yes," give the following information for every lawsuit in which sanctions were imposed. (If more than one, use another piece of paper and answer the same questions.)

1. Court that imposed sanctions (if federal, give the district and division): \_\_\_\_\_

2. Case number: \_\_\_\_\_

3. Approximate date sanctions were imposed: \_\_\_\_\_

4. Have the sanctions been lifted or otherwise satisfied? ☐ YES ☐ NO

C. Has any court ever warned or notified you that sanctions could be imposed?        YES        NO

D. If your answer is "yes," give the following information for every lawsuit in which a warning was issued.  
(If more than one, use another piece of paper and answer the same questions.)

1. Court that issued warning (if federal, give the district and division): \_\_\_\_\_
2. Case number: \_\_\_\_\_
3. Approximate date warning was issued: \_\_\_\_\_

Executed on: 10-5-22  
DATE

\_\_\_\_\_  
(Signature of Plaintiff)

### PLAINTIFF'S DECLARATIONS

1. I declare under penalty of perjury all facts presented in this complaint and attachments thereto are true and correct.
2. I understand, if I am released or transferred, it is my responsibility to keep the court informed of my current mailing address and failure to do so may result in the dismissal of this lawsuit.
3. I understand I must exhaust all available administrative remedies prior to filing this lawsuit.
4. I understand I am prohibited from bringing an *in forma pauperis* lawsuit if I have brought three or more civil actions or appeals (from a judgment in a civil action) in a court of the United States while incarcerated or detained in any facility, which lawsuits were dismissed on the ground they were frivolous, malicious, or failed to state a claim upon which relief may be granted, unless I am under imminent danger of serious physical injury.
5. I understand even if I am allowed to proceed without prepayment of costs, I am responsible for the entire filing fee and costs assessed by the court, which shall be deducted in accordance with the law from my inmate trust account by my custodian until the filing fee is paid.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
(Day) (month) (year)

\_\_\_\_\_  
(Signature of Plaintiff)

**WARNING: Plaintiff is advised any false or deliberately misleading information provided in response to the above questions may result in the imposition of sanctions. The sanctions the court may impose include, but are not limited to, monetary sanctions and the dismissal of this action with prejudice.**

e state who, what, when, where and the disciplinary case number if appropriate

was throwing up, bad head  
d pressure, there is a whole  
who are sick on this unit.  
call to medical because I  
I was really bad off,  
refuse ur treatment and  
bull crap it is very unprofessional  
re was high because could  
when I was moved security  
Pillus so still have not got  
le don't ~~care~~ care if you die  
job is our safety and as I  
I feel horrible. This medical  
d things to inmates from what  
g able to take my meds  
is really bad also because  
property and have not gave  
been writing medical but  
nse and how there  
not to help me when I  
ran does not do her job at  
e in a official capacity,

TURE IS REQUIRED ON BACK OF THIS FORM

(OVER)

Appendix F



9-5-22

To Whom this may concern, I am writing you just for your records, As yall no I am still haveing problems here in TOW. Every were I go it only gets worst, why I don't no, but its a headache and my blood pressure goes up. NOW I am some were else and going through the same things. This aint my first suit placed, but really on a professional level justice needs to take place, if me myself does something to inflict harm on any official I get charges real quick. What comes out of my mouth is a 100% true, look at my Civil Suit from the Byrd Unit I was cleary assaulted for no reason. All these so called Sergeants Lt's and Captains major and including Wardens are only after one thing a check from the State. Even the State Police don't do there job, they let ~~is~~ insent-harmless old school men loose there lifes due to officers killing them by harm. I under stand this takes time, but a result needs to go in the Plaintiffs way. Some day, the system is wrong also they just cover it up. At Strigfellow Gordon, Patrick & Jones right away showed me a evil racist side.

[Turn to back]

Also mail Room was tampering with  
my mail which is a federal crime.  
Medical was denying my treatment, had a  
hernia and wanted it removed, they were  
over ruling it with there bull crap opinion.



Defendant 7 - Classification - Hereat Wynne.  
[REDACTED] Hastings

I clearly explained to her what's going on, she does not help. I am being harassed every day. It's getting old. They are provoking me.

---

Defendant 8 - Captain Mecedo.

As the captain of Wing she doesn't address nothing. I have been in a cell with a light witch & out of compliance. It's her job.

Sullivan Sullivan 2390812

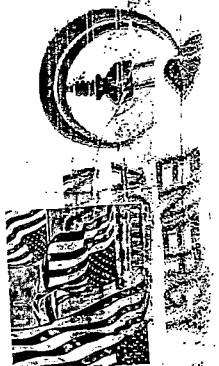
810 FM 2821 W Highway 75 N

Huntsville TX 77349

Wynn-Unit

NORTH HOUSTON TX 773

6 OCT 2022 PM 3 L



United States Courts  
Southern District of Texas  
FILED

OCT 13 2022

Nathan Ochisner, Clerk of Court

United States District Courts  
Federal Courts  
Southern District of Texas

P.O. Box 61010

Houston TX 77208

77208-101010